

CALFEE, HALTER & GRISWOLD

Docket No. 12873/04605

DECLARATION
AND POWER OF ATTORNEY
ORIGINAL APPLICATION

As below named inventors, we hereby declare that:

Our residence, post office address and citizenship are as stated below next to our names.

We believe we are the original, first and joint inventors of the subject matter which is claimed and for which a patent is sought on the invention entitled:

NASAL MASK

the specification of which

☒ is attached hereto,

☐ was filed on _____ as Application Serial No. _____.

☐ and was amended on _____
(if applicable)

We hereby state that we have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

We acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

We hereby appoint the following attorney(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

All attorneys associated with Customer No. 24024

Address all telephone calls to Nenad Pejic at telephone No. (216) 622-88358.

Address all correspondence to CALFEE, HALTER & GRISWOLD, LLP, 800 Superior Avenue, Suite 1400, Cleveland, Ohio 44114.

We hereby declare that all statements made hereon of our own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of first inventor: **Tom Sprinkle**

Inventor's

Signature _____

_____ Date

Residence 20751 Beachwood Drive, Rocky River, Ohio 44116

Citizenship U.S.

Post Office Address 20751 Beachwood Drive, Rocky River, Ohio 44116

Full name of second inventor: **Mary B. Whitesel**

Inventor's

Signature _____

_____ Date

Residence 18555 Mennell Road, Grafton, Ohio 44116

Citizenship U.S.

Post Office Address 18555 Mennell Road, Grafton, Ohio 44116

Full name of third inventor: **Mark E. Rosenkranz**

Inventor's

Signature _____

_____ Date

Residence 6810 Dartworth Drive, Parma, Ohio 44129

Citizenship U.S.

Post Office Address 6810 Dartworth Drive, Parma, Ohio 44129

Full name of fourth inventor: **Neal Joseph Curran**

Inventor's

Signature

Date

Residence 17837 Lake Road, Lakewood, Ohio 44107

Citizenship U.S.

Post Office Address 17837 Lake Road, Lakewood, Ohio 44107

Full name of fifth inventor: **V. A. Hodos**

Inventor's

Signature

Date

Residence 13904 Highlandview Avenue, Cleveland, Ohio 44135

Citizenship U.S.

Post Office Address 13904 Highlandview Avenue, Cleveland, Ohio 44135